

CAED 435 (Rev. 04/18)		United States District Court, Eastern District of California		Case 2:20-cr-00175-TLN Document 63 Filed 08/14/23 Page 1 of 1		FOR COURT USE ONLY					
TRANSCRIPT ORDER						DUE DATE:					
PLEASE Read Instruction Page (attached):											
1. YOUR NAME Linda Harter		2. EMAIL leticia_zaffa@fd.org		3. PHONE NUMBER 916-498-5700		4. DATE August 14, 2023					
5. MAILING ADDRESS 801 I Street, 3rd Floor				6. CITY Sacramento		7. STATE CA	8. ZIP CODE 95814				
9. CASE NUMBER 2:20-cr-00175-TLN		10. JUDGE Hon. Troy L. Nunley		DATES OF PROCEEDINGS							
				11. FROM July 20, 2023		12. TO July 20, 2023					
13. CASE NAME US v. Kristy Felkins				LOCATION OF PROCEEDINGS							
				14. CITY Sacramento		15. STATE CA					
16. ORDER FOR											
<input type="checkbox"/> APPEAL No.		<input checked="" type="checkbox"/> CRIMINAL		<input type="checkbox"/> CRIMINAL JUSTICE ACT		<input type="checkbox"/> BANKRUPTCY					
<input type="checkbox"/> NON-APPEAL		<input type="checkbox"/> CIVIL		<input type="checkbox"/> IN FORMA PAUPERIS		<input type="checkbox"/> OTHER (Specify)					
17. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested) You must provide the name of the Reporter.											
TRIAL		DATE(S)		REPORTER		HEARINGS		DATE(S)		REPORTER	
<input type="checkbox"/> ENTIRE TRIAL						<input checked="" type="checkbox"/> OTHER (Specify Below)					
<input type="checkbox"/> JURY SELECTION						Sentencing Hearing		July 20, 2023		Maryann Valenoti	
<input type="checkbox"/> OPENING STATEMENTS											
<input type="checkbox"/> CLOSING ARGUMENTS											
<input type="checkbox"/> JURY INSTRUCTIONS											
18. ORDER (Grey Area for Court Reporter Use)											
CATEGORY	ORIGINAL (Includes Certified Copy to Clerk for Records of the Court)	FIRST COPY	ADDITIONAL COPIES	NO. OF PAGES ESTIMATE				COSTS			
ORDINARY	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES								
14-Day	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES								
EXPEDITED	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES								
3-Day	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES								
DAILY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES								
HOURLY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES								
REALTIME	<input type="checkbox"/>	<input type="checkbox"/>									
CERTIFICATION (19 & 20) By signing below, I certify I will pay all charges (deposit plus additional).				ESTIMATE TOTAL							
19. SIGNATURE /s/ Linda Harter				PROCESSED BY							
20. DATE August 13, 2023				PHONE NUMBER							
TRANSCRIPT TO BE PREPARED BY				COURT ADDRESS							
		DATE	BY								
ORDER RECEIVED											
DEPOSIT PAID				DEPOSIT PAID							
TRANSCRIPT ORDERED				TOTAL CHARGES							
TRANSCRIPT RECEIVED				LESS DEPOSIT							
ORDERING PARTY NOTIFIED TO PICK UP TRANSCRIPT				TOTAL REFUNDED							
PARTY RECEIVED TRANSCRIPT				TOTAL DUE							